



## PART B - FEE(S) TRANSMITTAL

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2650 7550 07/22/2004

ALFRED H. MURATORI  
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Alfred H. Muratori  
22 July, 2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/521,437	02/03/2001	Andrew T. Hunt	MCX-002-07	0003

TITLE OF INVENTION: METHODS OF CHEMICAL VAPOR DEPOSITION AND POWDER FORMATION

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
non-provisional	NO	\$1330	\$300	\$1630	07/22/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CHEN, RRET P	1762	427-005000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" indication from PTO/SB/122, Rev 03-02 or more recent) attached. Use of a Check Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Alfred H. Muratori  
2. Wayne E. Nacker  
3. Ed Kelly

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Indication of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Micro Coating Technologies, Inc.

Atlanta, GA

Please check the appropriate assignee category or categories (will not be printed on the patent).

☐ Individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - 0 of Copies

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2030 is attached.☐ The Director is hereby authorized by check the required fee(s), or credit any overpayment, to Deposit Account Number 501231 (enclose an extra copy of this form).

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7/22/04  
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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 4311-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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